

MENTAL HEALTH UPDATE May 5, 2009

Pieces Of History In Vermont Mental Health

The “Pieces of History” series in the Mental Health Update describes key events and significant policy milestones in the evolving Mental Health Systems of Care, thus, connecting our past to the present.

1985 - On May 1, 1985, the Vermont Department of Mental Health published its first weekly data report, beginning a series that has continued (with occasional interruption) into the present. These weekly data reports were originated by Deputy Commissioner Neil McLaughlin shortly after receipt of the first Quarterly Service Report (QSR) data files submitted to DMH by designated Community Mental Health Centers. The explicit intention was that “these short reports would help increase our understanding of the workings of Vermont’s MH/MR service delivery system at the same time as they help increase the quality and acceptability of our statistical data base”.

In 1996 DMH’s capacity to understand larger systems of care was greatly enhanced by the introduction of Probabilistic Population Estimation, a statistical method that determines the number of people shared across data sets without reference to unique person identifiers.

In 2004, the Vermont Performance Indicator Project (PIP) weekly data reports received an award from by the Annapolis Coalition on Behavioral Health Workforce Educational Innovation for innovative education of the behavioral health workforce.

To be added to the mailing list for the DMH weekly PIP reports, e-mail to pip@vdh.state.vt.us .

Dr. Melinda Murtaugh recognized for Public Employee Award

Melinda Murtaugh will be recognized as an outstanding employee of the Department of Mental Health this week at a Public Employee Recognition Award luncheon hosted for all employees and teams nominated for recognition on May 6th. Melinda was nominated based on her number of years of dedicated service and her work related to the state’s

Mental Health Block Grant, management of Special Services funding, and monitoring of the state and local system of care plans.

“Melinda consistently offers the same thoughtful approach regardless of whether the need is for an individual or on behalf of our mental health system. Dr. Melinda Murtaugh is quiet and unassuming much of the time, but is always ready to step up to any work or project assignment as both a reviewer or as an active team member when needed. Her dedication, professionalism, and human qualities contribute to the Department's ongoing vision of people responding "with compassion for and a determination to respond effectively and respectfully to the mental health needs of all citizens".”

Congratulations and heartfelt thank you to Melinda from the Department of Mental Health.

2009 Governor's Award for Outstanding Volunteer Community Service

On Saturday, April 25th, Governor Douglas and Deputy Secretary Flood hosted the VT Commission on National and Community Service 2009 Governor's Award for Outstanding Volunteer Community Service ceremonies in Montpelier. Among the recipients of the awards this year were two members of the Mental Health Adult State Standing Committee, Marty Roberts, and Clare Munat. Marty and Clare were cited for bringing "the voices and perspectives of consumers of mental health services and families of adults with severe mental illness to the Department of Mental Health". DMH appreciates the service of Marty and Clare, and the many persons who offer the department and all Vermonters their time and energy to improve mental health services in our state.

ADULT MENTAL HEALTH

SAMHSA creates online resource for discussion of future of behavioral health system

The Substance Abuse and Mental Health Services Administration (SAMHSA) has created a new place on its website www.samhsa.gov/healthreform for posting and exchanging ideas about the issues and opportunities surrounding the future shape of America's health system - especially on how reform may affect mental health, substance abuse prevention and treatment services.

The goal of the web site is to provide background information to policy makers and opinion leaders on this important perspective of the health reform discussion. States, local governments, providers, consumers, the recovery community and family members can work together on this website to examine opportunities where health system reform might enhance prevention, treatment, and recovery services to people in need.

The online resource is part of an ongoing effort by SAMHSA to encourage active participation in the national conversation about the future course of the nation's healthcare system.

Beginning in December 2008 the agency has convened a series of meetings involving constituent groups, people in recovery, consumers, healthcare providers, advocates, health service providers, health service administrators and SAMHSA staff to generate ideas about advancing health through system reform and preparing SAMHSA for its role in a reformed system. The ideas developed through these discussions are currently posted on the website as well as background information on the key role mental health and substance abuse-related issues play in the overall healthcare system.

SAMHSA is seeking additional ideas and comments from others on how the healthcare system can be reformed to better provide essential services in their communities. The www.samhsa.gov/healthreform site provides guidance on how to formally submit these comments and ideas to the agency. The site will be continually updated with these newly submitted ideas and information as part of the agency's ongoing effort to foster national discussion about health system reform in the mental health and substance abuse prevention and treatment communities.

SAMHSA is a public health agency within the U.S. Department of Health and Human Services. The agency is responsible for improving the accountability, capacity and effectiveness of the nation's substance abuse prevention, addictions treatment and mental health services delivery systems.

State Program Standing Committee for Adult Mental Health Is Recruiting Members

The Standing Committee for Adult Mental Health is currently recruiting three people to fill vacancies for a consumer, a family member, and a provider. The committee advises the Commissioner and Department of Mental Health (DMH) on hiring of key management, evaluation of quality in the public system, departmental policy, grievances and appeals, and other mental-health issues that may arise from time to time. Members participate in the designation process through representation on site visit teams along with DMH central office staff to the state's ten designated agencies (agencies are designated every four years). Standing Committee members are also on Vermont's Mental Health Block Grant Planning Council, which makes recommendations about the expenditure of the state's share of federal mental health block grant funding.

The Standing Committee meets once a month, usually on the second Monday, in Stanley Hall, in the State Office Complex in Waterbury. Meeting time is 1:00-4:30 in the afternoon.

Anyone interested in joining the State Program Standing Committee for Adult Mental Health should contact Melinda Murtaugh at the Department of Mental Health, 108 Cherry Street, P.O. Box 70, Burlington, Vermont 05402-0070. Telephone: (802) 652-2000. E-mail: Melinda.Murtaugh@ahs.state.vt.us.

Lamoille County Mental Health Receives Approval to Renovate Harrel Street Facility in Morrisville

Lamoille County Mental Health has received a Certificate of Approval to renovate the former Genesis Health Care facility that was acquired by the organization in 2008 for the purposes of centralizing most of its administrative and clinical services in Morrisville.

The Commissioners of the Department of Mental Health and the Department of Disabilities, Aging and Independent Living have approved renovations of up to \$550,000 for the former nursing home facility which will now serve as the main offices and several of the clinic-based program services provided by the designated mental health agency. The agency's Children's Programs, Developmental Disabilities Services, and Community Rehabilitation and Treatment Programs will be co-located with the Administrative Services in the newly renovated 30,000 square foot building. The agency's Emergency Services Program will remain in space adjacent to Copley Hospital. The agency is hoping to occupy the renovated facility by July 1, 2009.

CHILDREN'S MENTAL HEALTH

Transition Grant Update

You may have heard by now that the training scheduled with the GAINS Center by the Youth In Transition (YIT) Grant's Outreach and Operations Team about the Sequential Intercept and Critical Intervention Points Models has been postponed from May 7 to July 9. It will still be held at the Elks Club in Montpelier. We hope many representatives of the criminal and juvenile justice systems will attend along with mental health system representatives and others to hear Chief Justice Paul Riber and AHS Secretary Rob Hoffman open the training session, then to learn about how a more systematic approach to collaboration between these systems can improve outcomes for youth in transition. During the afternoon of July 9, the people present will have the opportunity to further the regional YIT planning; they will receive technical assistance not only from the GAINS Center presenters but also from the federal TA Partnership Team, which will be making its first site visit to Vermont for this System of Care grant from July 8-10....Other news is that the YIT Outreach and Operations Team will be meeting with regional planning groups on May 15 at the Youth Workers' Conference at the Sheraton. The YIT Grant is sponsoring 3 of 30 workshops, including one by the lunch-time speaker Ross Szabo, a young man who speaks frequently for the National Mental Health Awareness Campaign about his experiences coping with Bipolar Disorder. Youth are coming from all over the state to join Ross in defining a youth-driven system of care. Stay tuned!

Trauma Grant

DMH is in the process of applying for a three year \$400,000 SAMSHA grant by 5/13/09. The purpose of this grant will be to establish a Vermont Child Trauma Collaborative, comprised of community-based treatment and service organizations, to ensure trauma-informed care and empirically-based trauma treatment is available to children and families throughout Vermont. The goals of this service and treatment collaborative will be the following:

- all children in Vermont will have access to trauma-informed services throughout the system of care;
- all children who screen positively for trauma will receive a standardized trauma assessment;

- all children with complex trauma and their families will be referred for and receive trauma-specific treatment services that are empirically based.

FUTURES PROJECT

Transformation Council Meets

The regular monthly meeting of the Transformation Council was held in Waterbury on Monday, April 27. Deputy Commissioner Beth Tanzman updated the group on a number of issues. Among the key points of information: (1) It is expected that stimulus funds will be available to extend the electronic health record statewide. During the discussion Transformation Council members, citing privacy issues, expressed the concern that the data system be constructed so that consumers retain the right to approve the release of their personal health record. (2) An initiative is under discussion in the Senate Health and Welfare Committee aimed at creating an Agency of Health Care Administration as a new cabinet-level agency reporting to the Governor. The administration has offered an alternative proposal to coordinate health care funding, policy and administration by establishing a deputy secretary for health care within the Agency of Human Services as a cabinet-level position reporting to the Governor. (3) The peer services program planning process is proceeding toward completion. The plan is scheduled for review on April 29. (4) The Department of Mental Health expects to move to Waterbury on or about August 13th. (5) The Department is seeking stakeholder input on how to organize a representative process around next steps in planning for the 15 bed secure residential facility.

VERMONT INTEGRATED SERVICES INITIATIVE (VISI)

VISI Forum

The next VISI Forum will take place on Friday May 15, 2009 from 9:30 to 12:30pm at the Langevin House, Vermont Technical College. The agenda topics will include the training DDCAT assessors and the opportunities to collaborate more with Vermont peer agencies. To RSVP, please contact Patty Breneman at (802) 652-2033 or patty.breneman@ahs.state.vt.us

VISI Evaluation

On April 21st, several federal grant evaluators visited Vermont to learn more about the Vermont Integrated Services Initiative activities. Several state, peer, and treatment providers spoke with them and discussed topics such as: Organization/Infrastructure for Change at the State Level; VISI Peer Initiatives; Provider Agency Evaluation; Policy Formation, Clinical Practices and Clinical Consult; and Co-Occurring Competencies and Workforce Development at both the Provider Agencies and at the State-level. We hope to have their evaluation report in the upcoming weeks.

NIATx (formerly known as Network for the Improvement of Addiction Treatment)

Over the past several months, six treatment providers have had the opportunity to participate in Vermont's NIATx process improvement collaborative. They have focused

on the NIATx aims: Reducing wait times, Reducing no shows, Increasing admissions, Increasing continuation.

An ADAP and DMH staff team also had undertaken a NIATx project with the aim of reducing intake paperwork. A convocation of treatment providers and partners was held on May 1st to serve as the culmination of this process and to celebrate and brainstorm ways to continue to build on this foundation. To learn more about NIATx, visit their website at: <http://www.niatx.net>.

VERMONT STATE HOSPITAL

Vermonters Attend SAMHSA Annual Meeting

“12 individuals representing Vermont attended the 2009 SAMHSA Granted Seclusion and Restraint Initiatives annual meeting in Bethesda, Maryland. A Consumer/survivor, Family member, Vermont Protection and Advocacy member, Vermont Department of Mental Health and staff from both the Brattleboro Retreat and the Vermont State Hospital spent April 28th and 29th with like members from the other states involved in the grant process. Included were representatives from CT, MA, NJ, NY, OK, TX, VA, SAMHSA and NASHMPD. Representatives networked and problem solved with their peers on topics related to the successful implementation of the Six Core Strategies to reduce the use of seclusion and restraint. Kathryn Power, MEd, Director of the Center for Mental Health Services, challenged the meeting goers in her opening remarks to grasp the goal of a mental health system that does not seclude or restrain the people it serves. Each state’s representatives shared highlights, and the remaining obstacles they each have experienced or need to overcome in the implementation of the grant.

Other presentations included; data gathered from the prior grant cohort, consumer roles, trauma identification and how to address it, using gathered data to inform practice, partnerships with protection and advocacy, understanding self inflicted violence, and the use of art to create sanctuary. The Vermont representatives were able to meet together during this time as well, and all agreed that this meeting was beneficial in building the kind of relationships that are most desirable in the collaboration necessary to make the reduction to seclusion and restraint interventions successful. Great ideas and stronger relationships returned to Vermont and both will be put to good use as the grant to Reduce the Use of Seclusion and Restraint continues on into year two. If you have any questions feel free to email or call Alternatives to Restraint and Seclusion Coordinator, Ed Riddell at 241-2303 or eriddell@vdh.state.vt.us.”

Protection Begins With Knowledge

The purpose of the Infection Control Program at the Vermont State Hospital is “to optimize patient safety, prevent transmission of infection, and to provide a safe hospital environment for patients, families, and health care workers”. The Infection Control Committee at VSH has a process in place to do this, outlined in the VSH Infection Control Manual.

Even though there is currently a heightened awareness because of the concerns about Swine Flu, there is a constant effort at VSH to make sure staff are aware of various Infection Control issues and of their role in helping to provide a safe environment.

Education and Training Coordinator Diane Bogdan has taken the lead for the Education and Training Department to author relevant and informative articles on Infection Control issues for the monthly E&T Newsletter. Topics in 2009 have included:

- Hand Sanitizer Cuts MRSA Risk
- The Hands Give it Away
- The Downhill of Long Nails
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Previous articles have covered such topics as exposure to blood, Hepatitis, Influenza, HIV, and Norovirus.

VERMONT STATE HOSPITAL CENSUS

The Vermont State Hospital Census was 47 as of midnight Tuesday. The average census for the past 45 days was 47.4